

| POSITION | INITIALS | NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | A-S | 12/943 | 1/2/01 |
| RESPONSE FORMALITY REVIEW | Em | 927 | 05/23/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|---------|
| 1 | ✓ | ✓ | 6/12/04 |
| 2 | ✓ | ✓ | |
| 3 | ✓ | ✓ | |
| 4 | ✓ | ✓ | |
| 5 | 0 | 0 | |
| 6 | ✓ | ✓ | |
| 7 | ✓ | ✓ | |
| 8 | ✓ | ✓ | |
| 9 | ✓ | ✓ | |
| 10 | 0 | 0 | |
| 11 | 0 | 0 | |
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| 14 | 0 | 0 | |
| 15 | 0 | 0 | |
| 16 | 0 | 0 | |
| 17 | ✓ | ✓ | |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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